



Skate Number: \_\_\_\_\_

Camp Week: \_\_\_\_\_

### **Camp Chillin' Sign-in Sheet**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Gender: \_\_\_\_\_

#### **Parent/Guardian Information 1:**

Parent/Guardian Name: \_\_\_\_\_

Cell #: \_\_\_\_\_ Daytime #: \_\_\_\_\_

#### **Parent/Guardian Information 2:**

Parent/Guardian Name: \_\_\_\_\_

Cell #: \_\_\_\_\_ Daytime #: \_\_\_\_\_

#### **Health and/or Allergies:**

\_\_\_\_\_  
\_\_\_\_\_

#### **People Authorized to Pick Up Child:**

\_\_\_\_\_  
\_\_\_\_\_

	<b>Arrival Time</b>	<b>Initial</b>	<b>Buy/Bring Lunch</b>	<b>Pick Up Time</b>	<b>Initial</b>	<b>Special Instructions</b>
<b>Monday</b>						
<b>Tuesday</b>						
<b>Wednesday</b>						
<b>Thursday</b>						
<b>Friday</b>						